

FILED  
U.S. DISTRICT COURT  
DISTRICT OF COLORADO

2018 APR 23 PM 3:23

JEFFREY P. COLWELL  
CLERK

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLORADO

Civil Action No.

18-CV-00232

(To be supplied by the court)

BY \_\_\_\_\_ DEP. CLK

Anthony Ward, Plaintiff

v.

Lutheran Medical Center ET. AL

\_\_\_\_\_

\_\_\_\_\_

see attachment, Defendant(s).

*(List each named defendant on a separate line. If you cannot fit the names of all defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names of the defendants listed in the above caption must be identical to those contained in Section B. Do not include addresses here.)*

COMPLAINT

NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

**Plaintiff need not send exhibits, affidavits, grievances, witness statements, or any other materials to the Clerk's Office with this complaint.**

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLORADO**

Civil Action No. 18-CV-00232.

Anthony Ward, Plaintiff/Petitioner

v.

Lutheran Medical Center et. al

Grant Wicklund, President and CEO of Exempla Lutheran Medical Center,

Amanda E. Kao, MD,

Kevin Flynn, MD,

Bridgett Lauro, MD,

Jane Doe, triage nurse, RN,

Jane Doe, traveler nurse 1,

Jane Doe, traveler nurse 2,

Leslie Platt, RN (Patient Rep),

Lynne West, RN (Risk Management),

Scott Miner, Medical Director of the ED, FACEP,

John/Jane Doe Clinical Manager of the ED,

Kristina Richards, Clinical Nurse Manager,

The Department Office of Jefferson County Commissioner(s) in their official capacity,

The Office of Colorado Department of Public Health & Environment Defendant(s)/Respondent(s)

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**COMPLIANT**

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**A. PLAINTIFF INFORMATION**

*You must notify the court of any changes to your address where case-related papers may be served by filing a notice of change of address. Failure to keep a current address on file with the court may result in dismissal of your case.*

Anthony Word P.O. Box 1171 Denver, CO 80201  
(Name and complete mailing address)

(720) 485-0930  
(Telephone number and e-mail address)

**B. DEFENDANT(S) INFORMATION**

*Please list the following information for each defendant listed in the caption of the complaint. If more space is needed, use extra paper to provide the information requested. The additional pages regarding defendants should be labeled "B. DEFENDANT(S) INFORMATION."*

Defendant 1: Lutheran Medical Center 8300 West 38<sup>th</sup> Ave, Wheat Ridge, CO  
(Name and complete mailing address) 80033  
(303) 425-4500  
(Telephone number and e-mail address if known)

Defendant 2: Other defendants unknown  
(Name and complete mailing address)  
  
(Telephone number and e-mail address if known)

Defendant 3: \_\_\_\_\_  
(Name and complete mailing address)  
  
(Telephone number and e-mail address if known)

Defendant 4: \_\_\_\_\_  
(Name and complete mailing address)  
  
(Telephone number and e-mail address if known)

#### **A. PARTIES**

- A) Plaintiff Anthony Ward is a citizen of the United States who presently resides at the following: P.O. Box 1171, Denver, Colorado, 80204.
- B) Defendant(s) are all United States citizens who are employed at Lutheran Medical Center located at 8300 West 38th Avenue, Wheat Ridge, CO, 80033.  
Defendant(s) are all United States citizens who are employed at the Office of the County Commissioner at 100 Jefferson County Pkwy, Golden, CO, 80419.  
Defendant(s) are all United State citizens who are employed at the office of Colorado Department of Public Health & Environment, 4300 Cherry Creek S Dr, Denver, CO 80246.
- C) Expert witness(s) Denver Healthcare Providers are United States citizens, Denver Health Medical, 777 Bannock St, Denver, CO 80204.

**C. JURISDICTION**

*Identify the statutory authority that allows the court to consider your claim(s): (check one)*



Federal question pursuant to 28 U.S.C. § 1331 (claims arising under the Constitution, laws, or treaties of the United States)

List the specific federal statute, treaty, and/or provision(s) of the United States Constitution that are at issue in this case.

42 U.S.C.A. sec 1983, U.S.C.A sec 552a Privacy Act of 1974,

42 U.S.C.A sec 1395dd Emergency Treatment and Active Labor Act



Diversity of citizenship pursuant to 28 U.S.C. § 1332 (a matter between individual or corporate citizens of different states and the amount in controversy exceeds \$75,000)

Plaintiff is a citizen of the State of \_\_\_\_\_.

If Defendant 1 is an individual, Defendant 1 is a citizen of \_\_\_\_\_.

If Defendant 1 is a corporation,

Defendant 1 is incorporated under the laws of \_\_\_\_\_ (name of state or foreign nation).

Defendant 1 has its principal place of business in \_\_\_\_\_ (name of state or foreign nation).

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

### **C. JURISDICTION**

- 1) Identify the statutory authority(s) that allows the court to consider your claim(s) check one:

42 U.S.C.A. sec. 1983, Colorado Revised Statute sections 12-36-104(1)(a) and 24-4-103, 5 U.S.C.A. § 552a Privacy Act of 1974, 42 U.S.C.A. sec 1395dd Emergency Treatment and Active Labor Act.

- 1) Congress, promulgated the civil rights act of 1964 (1) pursuant to the Fourteenth Amendment. The Fourteenth Amendment of the Constitution, of the United States provides in part, and I quote, "No State shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States; nor shall any State deprive any person of life, liberty, or property, without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws." Add emphasis to equal, the right to equal and adequate and meaningful medical services.
- 2) Title 42 U.S.C 1983 provides a remedy for deprivation of rights secured by the Constitution and laws of the United States; when that deprivation take place "under the color of and statute ordinance, regulation custom used by any State or Territory."
- 3) 5 U.S.C.A. § 552a Privacy Act of 1974 establishes a code of fair information practices that governs the collection, maintenance, use

**D. STATEMENT OF CLAIM(S)**

*State clearly and concisely every claim that you are asserting in this action. For each claim, specify the right that allegedly has been violated and state all facts that support your claim, including the date(s) on which the incident(s) occurred, the name(s) of the specific person(s) involved in each claim, and the specific facts that show how each person was involved in each claim. You do not need to cite specific legal cases to support your claim(s). If additional space is needed to describe any claim or to assert additional claims, use extra paper to continue that claim or to assert the additional claim(s). Please indicate that additional paper is attached and label the additional pages regarding the statement of claims as "D. STATEMENT OF CLAIMS."*

CLAIM ONE: see attached

Supporting facts:

#### **D. Statement of Claim**

Violation of Constitutional Rights Plaintiff Ward asserts a colorable constitutional claim The Fourteenth Amendment equal protection of the law, i.e. class based animus against a class of minorities protected by the Federal Constitution, equal protection of the law. The plaintiff also asserts medical malpractice action based on medical negligence, intentional infliction of emotional duress, i.e. deprivation civil rights under the color of state law, i.e. Colorado Revised Statute Medical Practice Act title 12.

- 1) CLAIM ONE: Deprivation of Equal Protection of law pursuant to the Emergency Room and Active Labor Act.

##### **Supporting Facts:**

- A) Lutheran Medical Center agents, employees and borrowed employees rendered a level of medical care that was below the acceptable standard of care innumerate Emergency Room and Active Labor Act. In support, Plaintiff Ward specifically alleges that on the 10th of October, 2016 at 6:59P.M., he arrives at Lutheran Medical Center experiencing a life threatening medical emergency requiring emergency treatment. The origin of the illness derived from involuntary ingestion from an unidentifiable opium substance acquired by eating a soup. During the triage process, Plaintiff/ Patient Ward complained consistently of an abdominal pain, diarrhea, nausea, respiratory difficulties in breathing. Plaintiff Ward asserts that the Jane Doe Triage nurse **intentionally** fabricated the facts and circumstances of patient's symptoms in a manner that rose to the level intrinsic fraud. Exhibit A, page four from Lutheran Medical Center Report states that plaintiff/ patient Ward "is a light smoker." The plaintiff has never smoked. The Triage Nurse intentionally failed to communicate accurate information such as the time line in which the emergency episode begun, plaintiff quotes page three of Lutheran Medical Center Report Exhibit B, "He associates symptoms with "bad soup" he ate at a restaurant 5 days ago, although his symptoms didn't start until several days later. He reports he did take a laxify of after he ate soup in order to "detoxifying" but did not have diarrhea until yesterday morning. He denies any known sick contacts; no one ate the same thing at the restaurant that day." The plaintiff categorically refutes these statements and asserts that the plaintiff explained to the Jane Doe Triage nurse it was two days instead of five days. The plaintiff also explained that he took a laxative on Friday October 8<sup>th</sup> because his friend told him that he though he saw a foreign substance in the plaintiff's food, the laxative did not work and the plaintiff thought that he was okay. Saturday October 9<sup>th</sup> came and the plaintiff felt sluggish and energy levels had diminished. When Sunday October 10<sup>th</sup> arrived and the plaintiff symptoms had gotten worse, he began throwing up and massive diarrhea at which point the plaintiff went to the hospital. Around 7:10P.M, after my initial vitals, blood pressure 133/52 (hypotension), were taken the plaintiff was escorted to the back by unidentified traveler nurse one. Around 7:15P.M., physician Amanda E. Kao comes in



the room and goes over the sequence of events with the plaintiff. The plaintiff goes over the correct sequence of events that the triage nurse mentioned to the physician Kao erroneously and the plaintiff gets an EKG done. At which point Doctor Kao orders a CT Scan. Around 7:30P.M the same unidentified nurse takes Plaintiff to get the CT Scan during the travel from point A to point B the unidentified nurse asks me something and plaintiff tries to respond, however, due to diminished health unable to articulate competently to the unidentified nurse. The unidentified nurse one, ridicules and teases plaintiff's slowed speech pattern. Around 7:55P.M plaintiff's CT Scan is finished and same unidentified traveler nurse takes plaintiff back to his room. Around 8:20P.M Physician Kao comes back to the room and explains, "Probable cyst and benign hemangiomas in the liver," and continues "mild atelectasis in the lung base," and states the results of the test, she states that the plaintiff is in good health. The plaintiff subsequently asks, "Well how do you know if there is not anything in my blood since you never did a blood test? There could be a poison or a drug in my system and you would never know." Amanda responds sarcastically by saying, "Well do you want to take a drug test to rule drugs out?" The plaintiff states, "Yes I do." Amanda leaves the room. Physician Kao intrinsic findings are as follows the plaintiff quote from Exhibit C, page six and seven of Lutheran Medical Center Report, "31 male who presents emergency department complaining of 2 days of lower abdominal pain, a day and a half of diarrhea and several hours of nausea and vomiting. Patient is afebrile on ED arrival with stable vital signs. He is bradycardic, EKG shows sinus bradycardia and given his young age, this likely physiologic," "Patient's lab results show no leukocytosis or anemia, NO SIGNIFICANT ELECTROLYTE ABNORMALITY OR RENAL FAILURE." Physicians Kao fraudulent record continues with and the plaintiff quotes, "2155 Patient now states what was in the soup was small "packets" of something and that he just called his cousin who was with him, his cousin told him that he took one of the packets out of the soup and gave it to the police who reportedly said that it was probably heroin, wanted to know if patient wants to press charges. Patient states that he is still feeling nauseated. Plan additional IV fluids and urine tox screen to determine if he still has any illicit drugs in his system. At this time, MY SUSPICION FOR SIGNIFICANT NARCOTIC OR OVERDOSE IS LOW." This is a false record or statement, the plaintiff explained his scenario to both the triage nurse and the doctor, numerous times and the plaintiff's words were still twisted and misconstrued. The animus was so strong that they purposely refused to see the evidence in their face. The plaintiff had extremely low blood pressure at this moment, vitals 100/55 mmHg, which meant that the plaintiff had an electrolyte abnormality. At the moment, Amanda Kao enters my room at about 8:40P.M., and states, "Dr. Kevin Flynn will be taking over." About 8:50P.M., physician Kevin Flynn enters patient's room. Physician Flynn state, "I'm have a nurse come in and administer an I.V. for you. How does that sound?" The patient agrees to I.V. and urinary analysis. Around 9P.M., the second unidentified traveler nurse enters the room and starts getting the I.V. equipment ready. When the second unidentified nurse is ready she yanks plaintiff's arm toward her and the second unidentified traveler nurse plunges the I.V. in his arm with such force it rocked the bed. The plaintiff protest with a painful grunt. At which point the

second unidentified nurse intentionally wraps the cord around the bed. Physician Flynn enters the room at 9:05P.M., and states, "When you are ready to use the bathroom Mr. Ward go use that bathroom right there." Physician Flynn makes a pointing gesture across the hall to the bathroom that is next to the nurses' station. The plaintiff agrees. Around 9:20P.M., the fluids are working and the plaintiff feels the urgency to use the bathroom, he sees unidentified traveler nurse one, and calls out to her. The unidentified traveler nurse one comes to the door and states coldly, "what do you want?" the plaintiff states, "I have to use the bathroom and the other nurse tangled my cord and I need help so I can use the bathroom." The unidentified nurse states, "Too bad I have patients that have real problems," and abruptly walks off. A few moments the second unidentified nurse walks pass my room, the plaintiff yells out, "hey I need some help, my cords are tangled and I have to use the restroom." The second unidentified nurse states cruelly, "That is your problem not mine, if you can't get up pee on yourself. You people are a waste of time!" This went on for about 30 minutes. The two unidentified nurses walking back and forth taunting me and making malicious statements like, "let's see if the monkey can climb out the bed." Finally, about 10:05 P.M., physician came back to the plaintiff's room and asks, "Have you used the bathroom yet?" The plaintiff embarrassed and angry states, "how can I use the bathroom hog tied like an animal? I came to the hospital to be helped not to be treated like a second-class citizen. I rather go home than have to be humiliated, you want a pee sample take my sheets." At that moment the plaintiff thought to himself only god and these cameras knows how bad these people treated me. Physician Flynn looks at me and states uncaringly, "So you want to go with the original plan, and go home then?" I subsequently respond, "I can't be treated like this. I came here for help because I don't know what is wrong with me. The people in this hospital are abusing me and making my situation worst." The physician Flynn ignores what the plaintiff says and states, "I will have the nurse come in and take the I.V. out and I will get your prescription. Good luck." About 10:15 unidentified traveler nurse one walks in and starts untangling the cord and says sarcastically, "you stink like pee, don't your people know how to use a toilet?" Plaintiff responds, "I do know how to use the bathroom. If you and the other nurse would have untangled me earlier I would have used the bathroom. By the way I am not a monkey." At the point this point the plaintiff notices the second unidentified traveler nurse standing in the doorway. The first unidentified nurse says, "You a monkey to me." Both nurses' laugh and the second unidentified traveler nurse states, "don't try to file a complaint, it will fall on deaf ears boy." At the point she puts my prescription on the counter, "Here is what you came here for. We got your oxy script right here you f—ing junkie." Both unidentified traveler nurses walk away laughing. It can clearly be said after looking at the totality of evidence that spirit of Jim Crow walks the halls of Lutheran Medical Center.

- B) The plaintiff was discharged from Lutheran Medical Center approximately at 10:35P.M. Plaintiff went to the bathroom to clean myself up and plaintiff called an Uber. The plaintiff leaves the hospital at 11:29P.M. in an Uber to his residence at that time, See Uber report. When plaintiff arrived home, he immediately starts throwing up. Plaintiff drinks some water and he went to sleep. When the plaintiff awakes again the plaintiff is in the hospital. The plaintiff directs your attention to 911 Call, Paramedic Report and Police Report. Plaintiff directs the courts kind attention to the injuries that plagued the plaintiff at Lutheran Medical Center were the same exact injuries complained of and addressed at Denver Health Hospital. The plaintiff's injuries sustained are as follows: ., opiate overdose episode which caused acute hypoxemic respiratory insufficiency, which lead to elevated transaminases, which caused acute renal failure, which then caused patient Ward to have a non-st-elevation myocardial infraction, and simultaneous caused mild acute encephalopathy; which caused plaintiff/patient Ward to have hyperkalemia. The acute renal failure caused urinary retention, and severe constipation. Plaintiff directs the courts kind attention to page 43, "Pt denies substance abuse; reports that he was "poisoned with an opiate" but episode described was 48 hours prior to arrival. Unclear what substance patient ingested, but is a long acting opioid compounded by AKI. MICU, patient required narcan x 1 for somnolence and respiratory depression (10/14/2016). He continues to have evidence of opioids (somnolence, pinpoints, hypoxia) and utox is persistently positive for opioids." Plaintiff states this to prove that the opioids were in his system for three days while he was in the hospital it is incomprehensible Physician Amanda Kao, MD could not find the same opioids in his system just eight hours before his admission to Denver Health. That states a cause of negligence. Plaintiff was in Denver Health six and a half days and although he may not receive the greatest treatment his entire time at Denver Health Hospital, he received adequate meaningful healthcare which allowed him to regain a semi-balanced that allowed him to perform a minimum of his daily task. The debilitating and diminishing effects of the tort-feasors actions, which caused harm to the plaintiff must be reviewed under the rubric of attentional inflection of emotional duress.
- C) The standard of care was breeched because Mr. Ward's blood pressure was never stabilized which deprived the plaintiff of equal protection of the law pursuant to both the Emergency Treatment and Active Labor Act and C.R.S title12. This is Plaintiff/Patient Wards intake blood pressure 133/52 (hypotension) and this is Patient Wards blood pressure at the time of discharge 143/77 (hypertension). Analysis according to the Physician's Desk Reference a blood pressure reading as such 133/55 denotes hypotension which is when the heart is not pumping enough blood to oxygenate the organs, and this demonstratively shows why the employees distorted the true statement of facts regarding plaintiff/patient Ward's opiate poisoning. The veracity of the plaintiffs medical malpractice injury; the plaintiff blood pressure at discharge denotes stage 1 hypertension which leads to stroke, heart failure, heart attack and kidney failure to name a few symptoms. Plaintiff/Patient Ward experienced a few of these conditions just a few hours after leaving Lutheran Medical Center due to gross negligence and this could have been prevented. How can the healing process begin without stabilizing the blood pressure? Patient Ward intake blood pressure reading and blood pressure reading at the time of discharge define the scope of

the standard of care implemented in this case. It is undisputed the level of care in this case crosses the threshold of litigation worthiness and establishes genuine issue of material facts. Whether respondents' professional negligence proximately caused infliction of injury on patient Ward, whether prior to discharge from hospital emergency room Lutheran Medical Center stabilized patient Ward's medical condition or whether hospital engaged in the unlawful and misfeasance act of patient dumping. It is undisputed that Amanda E. Kao, MD statement creates a unique medical conundrum while it is alleged that she misdiagnosed the opiate overdose; the second part of her statement proves that she was aware of the secondary causes for which patient Ward was later treated for by Denver Paramedics and Denver Health Hospital. See Exhibit E page 19. In fact, Amanda E. Kao statement creates the nexus that established tort-feasor liability, the plaintiff quotes, "THIS IS UNLIKELY RELATED TO YOUR CONDITION TODAY, BUT COULD BE SOMETHING AS SERIOUS AS CANCER!" Physician Kao's statement proximately caused the secondary cause of injury that occurred eight hours later the opiate overdose which caused acute hypoxemic respiratory insufficiency, which lead to elevated transaminases, which caused acute renal failure, which then caused patient Ward to have a non-ST-elevation myocardial infarction, and simultaneously caused mild acute encephalopathy; which caused plaintiff/patient Ward to have hyperkalemia. The acute renal failure caused urinary retention, and severe constipation and which lead to my untimely demise and resuscitation, refer to Exhibit A, Plaintiff Ward experience unconscious and conscious pain and suffering. Also see (Paramedic Report), (911 Call) and (Police Report).

### **Statement of Liability**

- 1) Under title 42 U.S.C. sec. 1983 it provides a cause of action who under any statute .. of any State, Territory... subjects, or causes to be subjected, any citizen .. to the deprivation of any rights, privileges or immunities secured by the Constitution and laws of the United States.
- 2) Under title 42 U.S.C. § 1395dd Emergency Treatment and Labor Act requires anyone coming to an emergency department to be stabilized and treated.
- 3) Under Colorado Revised Statute pursuant to section 12-36-106(3)(I), sub sections IV "Personal and responsible direction and supervision" required under these Rules and VIII. Unprofessional conduct.

### **Claim One Individual Liability**

- 1) Defendant unidentified Jane Doe triage nurse engaged in conduct that deprived the plaintiff secured by U.S Constitution. The Jane Doe triage nurse, violated the plaintiff's Constitutional rights secured by equal protection of the law. By intentionally fabricating intake notes and retained the plaintiff's hypotension blood pressure 133/52 from the treating physician(s) on the 10<sup>th</sup> of October, 2016 at 6:59p.m., of the plaintiff and started a conspiracy to prevent the defendant of equal protection of the ETALA federal statute.

- 2) Defendant(s) unidentified traveler nurse one and unidentified traveler nurse two from admission to discharge(6:59pm-1035pm) engaged in discrimination, in their individual capacity as agents or “borrowed employees” engaged in racial or other invidious class based animus and the conspiracy was aimed at depriving the plaintiff of rights that are protected against private or official encroachment. See grievance it contains factual averments that support the factual allegations of the plaintiff; “The clinical Manager of the ED, (Kristina Richards) is unable to address the behavior of the 2 nurses who provided care for you, as they both were Travelers and were at Lutheran on a temporary assignment and are no longer working at Lutheran.” Defendant(s) unidentified nurse one and two had knowledge of each other(s) wrong doings and knew plaintiffs blood pressure was never stabilized. Defendant(s) also mention in 1985 (3) had power to prevent the medical malpractice episode by relating relevant blood pressure readings to physicians and preventing plaintiff from using bathroom purposely neglected to do so and helped further the plaintiffs injuries that would eventually lead to opiate overdose episode which caused acute hypoxemic respiratory insufficiency, which lead to elevated transaminases, which caused acute renal failure, which then caused patient to have a non-st-elevation myocardial infraction, and simultaneous caused mild acute encephalopathy; which caused plaintiff/patient to have hyperkalemia. The acute renal failure caused urinary retention, and severe constipation. Both defendant(s) knew of conspiracy by their comments and plaintiff quotes, “don’t try to file a complaint, it will fall on deaf ears boy.”
- 3) Defendant physician Amanda E. Kao, MD from the time that she enters 7:15pm to her exit 8:35pm. Defendant Kao committed gross negligence by failure to perform a manifest duty; stabilization of patient’s blood pressure, abuse of prescription authority, and breached duty to warn of serious medical danger, enacted by the ETALA. The plaintiff quotes physician Kao, “THIS IS UNLIKELY RELATED TO YOUR CONDITION TODAY, BUT COULD BE SOMETHING AS SERIOUS AS CANCER,” the defendant does not identify any serious injury. Defendant Kao caused harmful injuries by failing to stabilize patient(s) blood pressure or opioid overdose which a reasonable physicians due diligence would have prevented. The strongest link in chain of tort-feasor liability is in espoused in the prophetic words of Ms. Kao, “NO SIGNIFICANT ELECTROLYTE ABNORMALITY OR RENAL FAILURE,” the very reason that the plaintiffs blood pressure was low was due to an electrolyte imbalance from the opioid, which, resulted in plaintiff admittance in Denver Health eight hours later for renal kidney failure and six and half days’ hospitalization.
- 4) Defendant physician Kevin Flynn, MD from the time he enters 8:50pm to 10:35pm on the 10<sup>th</sup> of October 2016, knew about the wrong doing of both unidentified nurse(s) and had power to prevent and neglected to do so, both unidentified traveler nurse(s) detrimental and abusive conduct to the plaintiff. Defendant Flynn read over patient’s medical notes and engaged with co-conspirators in joint participation by not stabilizing blood pressure and agreed to both physicians Amanda Kao and Bridgett

Lauro's statements regarding no electrolyte imbalance or no renal failure which prevented plaintiff's rights enacted by EMTALA.

- 5) Defendant Bridgett Lauro, MD from time plaintiff admission to time of discharge (6:59-10:35pm) on the 10<sup>th</sup> of October, 2016, she never prevented or aid in preventing the commission of the medical malpractice act. Defendant Bridget Lauro had access to plaintiff Ward's medical record the entire time that he was admitted to Lutheran Medical Center, and that failure to perform a manifest duty, along with corrective measures that could have prevented the resuscitation of plaintiff due to renal kidney failure by Denver Paramedics. Defendant Lauro participated aided both physician Amanda E Kao and Kevin Flynn in the failure to prevent adequate health care, the wrongful neglect could have been prevented, but instead was a willful deprivation of both rights and privileges secured by the Constitution.

CLAIM TWO: See attached

Supporting facts:

#### **D. SECOND CLAIM TWO**

Violation of Constitutional Rights Plaintiff Ward asserts a colorable constitutional claim

The Fourteenth Amendment equal protection of the law, i.e. class based animus against a class of minorities protected by the Federal Constitution, equal protection of the law. The plaintiff also asserts that defendants violated his right to a fair and impartial grievance resolution in accordance to the Federal Administration Act.

CLAIM TWO: Violation (1) due process clause of the Fourteenth Amendment, and negligence as well administrative remedies pursuant to Colorado Administrative Act, C.R.S title 24 Government article four.

##### **Supporting Facts:**

- A) Plaintiff Ward asserts that he attempted to file a grievance several times during a period of several months. It was not until the plaintiff took a witness with him, Mr. Ricky Fillmore on June 7<sup>th</sup>, 2017 that the plaintiff finally got through. The plaintiff met with Leslie Platt patient representative roughly about 2:15p.m. The plaintiff explained to her that he had been coming there for a long time and it seemed that representatives at Lutheran Medical Center were impeding his right to the grievance process. Ms. Platt assured me that that was not the case. Plaintiff asked for a standardized grievance form and she told him and the plaintiff quotes, "I will write your grievance for you." The plaintiff was quite unhappy with that and explained that, she could not convey the accurate sequence of events with the circumstance surrounding the medical emergency. Ms. Platt conveyed to him that it was Lutheran's policy and there was nothing that could be done about it. Plaintiff then indicated that he would like statements on the record and she asked and the plaintiff told her that he would mail his response in. Ms. Platt agreed. Plaintiff subsequently asked about Lutheran Medical Center's standard operating procedure manual, copy of the video surveillance cameras that were operating proximately the emergency room and all notes from doctors and nurses. Ms. Platt told plaintiff she would be back. Roughly, about ten minutes later Ms. Platt comes back in the room and states that plaintiff could get reports today but, the standard operating procedure manual required a record request and that the cameras relating to your issues and hospital visit was destroyed. Which plaintiff believes that that was an attempt to hinder due process. Plaintiff Ward agreed and received his medical report and asked how long the grievance process took for a decision to be made Ms. Platt replied, "fifteen business days." Plaintiff wrote both grievance and Open Records request and sent them both certified mail the same day. The following day the grievant sent an addendum. On the 7<sup>th</sup> of July 2017 between 11:45a.m.-12:45p.m. Again Ricky Fillmore and plaintiff Anthony Ward went back to Lutheran Medical Center asking about Mr. Wards delayed grievance response that was supposed to be answered on the 28<sup>th</sup> of June 2017. According to Lutheran Medical Center's policy when a grievance is filed a patient representative has 15 business days to answer the complaint; the plaintiff's grievance was six business days late. The following excerpts are quoted verbatim between these parties the patient Anthony Ward along with Ricky Fillmore, risk management coordinator Lynne West and patient representative Leslie Platt:



Anthony: I want to know why I file a grievance over a month ago and I have not received a response.

Leslie: Oh I sent it out earlier this week let me go get it.

She gets up and walks out room. Then Lynne starts talking.

Lynne: Well sometimes the United States Postal Service takes a while. I know I mail things to Florida and sometimes it takes two weeks. I don't know how long it will take in your circumstance since it's a P.O box. I do know that it will be dated this week.

Anthony: Well can you explain to me why my Open Records Request was denied.

Lynne: We are not a public agency. We are a private agency. The Open Records Act does not apply to us. We have attorneys that handle that stuff we (Leslie) do not know the law all that well.

Anthony: I understand that, however the law states that when you receive government funding and you come in contact with a member of the public you must disclose your records relevant to patient issues. I am a member of the public that means your records became public when you came in contact with me. Plus, the law also states that if you do deny my open records request that you must state what legal authority justify denying open records request.

Ricky: You are right you are a private agency therefore you being a private agency your agency receives federal funding as a religious institution, which means you come under the Federal Freedom of Information Act or known as the federal public records act. Which, means that the records Mr. Ward requested are available pursuant to the Freedom of Information Act.

Lynne: I contacted corporate and our corporate attorneys. You know a big organization like Lutheran has corporate attorneys and I informed them of your grievance and open records request. And they told me over the phone that your open records request for public records is denied.

This is when Leslie walks back in with the purposed grievance responses. I read it.

Ricky: You mean that corporate attorneys answered a grievance and open records request that was written with a verbal response? They didn't send you any type of correspondence?

Lynne: We usual just call each other up and communicate internally.

Ricky: So does that mean that I can quote you verbatim?

Lynne answers with her Res Gestae response.

Lynne: No that would be hearsay the conversation between me and our corporate attorney.

I hand the grievance to Ricky for him to read.

Anthony: Everything that I asked for is not mentioned in the open records request.

Lynne: Like what?

Anthony: I asked also for the individual insurance carrier of all the doctors and nurses.

Lynne: We consider that the same as the hospital insurance.

Anthony: Well in the Colorado Medical Practice Act it states that both nurses and doctors must have individual insurance carriers and make their insurance carrier available per request.

Leslie: No, no, no. We do not have to have individual insurance carriers we can make the choice to. Like I have insurance but every employee does not.

Lynne: I am covered by my employer. Are we almost done here? I have a meeting coming up, you just popping up is a surprise.

Anthony: Yes, we are. Thank you.

Leslie: Can you call before you come next time and make an appointment?

This concludes the verbatim narrative.

Lynne's statement demonstrates that she and Leslie disclosed privileged confidential medical information contained in Lutheran's system of records about the plaintiff to both corporate and their attorney(s) Chad Gilliam with Hall & Evans, LLC without getting a written notice from the plaintiff at any point of time. Lynne's statement also shows the unethical nature of Chad Gilliam and his fellow attorney(s) at Hall& and Evans, LLC by acting in the capacity of house council. More specifically the malfeasant broke the rules of professional Misconduct 8.4: "(c) engage in conduct involving dishonesty, fraud, deceit or misrepresentation, except that a lawyer may advise, direct, or supervise others, including clients, law enforcement officers, or investigators, who participate in lawful investigative activities," "(d) engage in conduct that is prejudicial to the administration of justice; ex-parte grievance resolution hearing conducted date unknown because plaintiff was uninvited, the communication with the executives and grievance staff and "(h) engage in any conduct that directly, intentionally, and wrongfully harms others and that adversely reflects on a lawyer's fitness to practice law." This grievance hearing that was conducted ran afoul of administrative due process which insures the grievant receives notice and opportunity to be heard, the grievant was denied this equal protection of the law.

B) Subsequently the following occurred on or about the 3<sup>rd</sup> of July 2017, an ex parte grievance resolution hearing conducted by Scott Miner the Medical Director ED, Jane/John Doe Clinical Manager of the ED, Kristina Richards the Clinical Nurse Manager, Leslie Platt patient representative and Lynne West risk management the results of internal investigation is as follows:

"Medical director determine that the care and treatment you received was appropriate and met the standard of care. You presented several days after "eating bad soup". Scott Miner continues and says, "You had abdominal pain and had a full work up including a CT scan of your abdominal. You stated there had been "bags "of heroin in the soup, you were that you had been "poisoned". There was never any history that you ingested the actual bags of "heroin" and on the CT scan of the abdomen; there was definitely no evidence of intestinal foreign bodies. A urine toxicology screen was ordered but you requested to be discharge before the urine was obtained". The plaintiff categorically and unequivocally refutes this narrative proposed as the reincarnation of intrinsic and extrinsic fraud and rises to the level of fraud upon the court. Shame

on you Scott Miner. These statements are medically inconsistent and diametrically opposed with the findings of Denver Health who the plaintiff raised the same complaint and received different results. Scott Miner reference to the urine toxicology screen was a cruel and derogatory joke insinuating the plaintiff's bed wetting episode in which the plaintiff was securely bound to the bed that rose to the level of cruel and unusual punishment i.e. deprivation of single human need. This aggravated the plaintiff's secondary causes and contributed to the near death experience after the discharge of Lutheran and before the admission to Denver Health. The secondary causes that were aggravated by Lutheran Medical Center's agents, borrowed employees and unidentified employees were atrocities that could have been prevented; see physician Amanda Kao's factual averments, "NO SIGNIFICANT ELECTROLYTE ABNORMALITY OR RENAL FAILURE," and "THIS IS UNLIKELY RELATED TO YOUR CONDITION TODAY, BUT COULD BE SOMETHING AS SERIOUS AS CANCER!" The plaintiff would like to address one clear and decisive fact that merits attention, the plaintiff never complained of a kidney injury! Amanda Kao's prediction of the very injury that triggered multiple injuries to multiple bodily organs categorically refutes the statement by Scott Miner saying that, "the appropriate standard of care was met." It is instructive to know Patient Ward's blood pressure at intake was abnormal 133/52 (hypotension) and upon discharge the blood pressure was not stabilized and abnormal. How is the failure to stabilize a patient's blood pressure during the entire duration of the plaintiff's medical emergency episode appropriate standard of care? Is it the appropriate standard of care to prescribe an opiate to treat opiate overdose? The prescription prescribed by the physician crossed the threshold of abuse of prescription authority. Scott Miner has fully shown a great example of the unofficial custom of Lutheran Medical Center that had the effect of a fully adapted policy.

The Clinical Nurse Manager Kristina Richards documents that plaintiff, "4days ago ate some soup at a restaurant that was bad, vomiting today with abdominal pain," and continues, "Nurses do not make diagnosis's they use symptoms and complaints for the reason why a patient has presented for care. First the Clinical Nurse misquotes the erroneous intrinsic fraud statement documented by the triage nurse fraudulently puts "5days" not "4days". Secondly, plaintiff agrees that nurses "do not diagnosis but use symptoms to help find problems associated with patient injuries," with that said the triage nurse committed intrinsic fraud by not properly documenting the injuries of the plaintiff. Nurses are supposed to help patients be as comfortable as possible in a medical emergency not cause or add to injuries of patients, nor add or extract information regarding medical emergencies.

The Jane/John Doe Clinical Manager of ED, makes crucial and relevant revelation and admits of a conspiracy the plaintiff quotes, "is unable to address the behavior of the 2 nurses who provided care for you, as they are both Travelers and were at Lutheran on a temporary assignment and are no longer working at Lutheran." It is very incomprehensible under respondeat superior doctrine that the master is not responsible for his servants. There is no way that the Clinic Manager of ED, can contact the nurses to get a fraudulent statement, but cannot give names of the people making these statements.

### **Statement of Liability**

- 1) Under title 42 U.S.C. sec. 1983 it provides a cause of action who under any statute . of any State, Territory... subjects, or causes to be subjected, any citizen .. to the deprivation of any rights, privileges or immunities secured by the Constitution and laws of the United States.
- 2) Under title 42 U.S.C. § 552a Privacy Act of 1974 establishes a code of fair information practices that governs the collection, maintenance, use.

### **Claim Two Individual Liability**

- 1) Leslie Platt patient representative for a period of several months deprived the plaintiff of his right to access to the grievance system. The plaintiff further alleges that defendant Ms. Platt conducted ex-parte communication with several of the other defendant(s) to deprive the plaintiff of his right to an adequate grievance resolution. Leslie Platt along with fellow grievance board reps, Corporate staff and attorney(s) conspired to conceal both the names and the wrong- doing of the unidentified traveler nurses and the subpar standard of care provided by the aforementioned physicians that lead to plaintiff's six and half-day hospital stay.
- 2) Lynne West risk management along with fellow grievance, board personnel staff, corporate and attorney(s) deprived the right to a fair and impartial grievance resolution by concealing the names of the unidentified triage, and unidentified traveler nurses, negligence in providing two different third parties with patient medical records without consent, and ex-parte communication. Lynne states on the June 27, 2017 Open Records response, "the information you requested is confidential, proprietary that we do not provide to the public," although the information the plaintiff asked for was regarding the conduct of staff when they interacted with the public. Lynne West continues on the June 27, 2017, "Standard Operating Procedure Manual emergency intake, admission and discharge," "Personnel records including history of staff and physicians," and "video surveillance." The plaintiff asserts that the very prevention of these documents was depriving the plaintiff of rights and privileges according to the fourteenth amendment. How can Lutheran Medical Center conduct business with the public and draft business papers that are for use of the public and then deny a member of the public access to them?
- 3) Scott Miner the Medical Director of the ER along with fellow grievance, board personnel staff, corporate and attorney(s) deprived the right to a fair and impartial grievance resolution by concealing the names of the unidentified triage, and unidentified traveler nurses, negligence in providing two different third parties with patient medical records without consent, and ex-parte communication. Mr. Miner makes many erroneous statements about the standard of care of the physicians that gave the plaintiff treatment in the aforementioned paragraphs. These statements prove the invidious animus that both Mr. Miner and the rest of the grievance staff felt and had toward the plaintiff whom they never met, and went to the hospital to receive help. Scott Miner had the power to prevent the conspiracy of depriving the plaintiff of a fair and impartial grievance hearing yet he

participated and willfully aided his fellow conspirators with aid depriving the plaintiff of proper due process and his privilege to participate in unknown hearing.

- 4) Kristina Richards the Clinical Nurse Manager of the ED, along with fellow grievance, board personnel staff, corporate and attorney(s) deprived the right to a fair and impartial grievance resolution by concealing the names of the unidentified triage, and unidentified traveler nurses, negligence in providing two different third parties with patient medical records without consent, and ex-parte communication. Ms. Richards never addresses the unidentified triage nurse intentional act of not given or relating the proper information to the physicians. Ms. Richards gave the triage nurse staff privileges to the unidentified triage nurse whom if she would have simply related the plaintiff's abnormal blood pressure reading to the proper staff may have prevented the medical episode. Instead Ms. Richards makes the "commit that nurses don't treat but relay information," her statement does two things it allows for the nurses to have a loop hole through horrific treatment and directly admits that the doctors failed to do an manifest duty in making treatment for the plaintiff. Like other fellow grievance personnel, Ms. Richards aided in the conspiracy of covering up the subpar standard of care that the plaintiff experienced at the hospital and denied the plaintiff the right to be heard and speak on his own behalf at grievance hearing.
- 5) The unknown Clinical Nurse Manager along with fellow grievance, board personnel staff, corporate and attorney(s) deprived the right to a fair and impartial grievance resolution by concealing the names of the unidentified triage, and unidentified traveler nurses, negligence in providing two different third parties with patient medical records without consent, and ex-parte communication. The Unknown Clinical Nurse Manager with her own statement admits, "is unable to address the behavior of the 2 nurses who provided care for you, as they are both Travelers and were at Lutheran on a temporary assignment and are no longer working at Lutheran." This statement proves factual averments made by plaintiff of there being a conspiracy to cover-up subpar health care given to the plaintiff resulting in his resuscitation and six and half day hospital stay. The defendant along with other grievance personnel deprived the grievant the right and privilege to equal access to the grievance process and to heard at the grievance hearing.

#### **D. THIRD CLAIM THREE**

Violation of Constitutional Rights Plaintiff Ward asserts a colorable constitutional claim

The Fourteenth Amendment equal protection of the law, i.e. class based animus against a class of minorities protected by the Federal Constitution, equal protection of the law. The plaintiff asserts that § 1 of the Civil Rights Act simply conferred jurisdiction to the feds to enforce §1 of the Fourteenth Amendment- a situation precisely analogous to the grant of diversity jurisdiction under the Contrast Clause was enforced against municipalities.

CLAIM THREE: Negligence pursuant equal protection clause of Fourteenth Amendment, under the Emergency Treatment and Labor Act and U.S.C 1983.

##### **Supporting Facts:**

- 1) Plaintiff Ward specifically alleges that he called the defendant Colorado Health Facilities & Emergency Medical Services (CHFEMS) a department of the Colorado Department of Public Health and Environment (CDPHE) on the 8th July 2017 to make a formal complaint against Lutheran Medical Center. The plaintiff received a call back on the 12th July 2017 and talked to Katie Meade a representative of CHFEMS acting in their official capacity. The plaintiff explained a few things to the intake coordinator. That one, the health care received at the Lutheran Medical Center did not meet the standard of care, which the staff had a problem dealing with minorities, that the plaintiff did not receive adequate due process through the grievance program and that Lutheran Medical Center refused to comply with either CORA or FIOA. The in-take coordinator Katie Meade explained to the plaintiff that CHFEMS or CDPHE was an organization that represented the state and handled all issues dealing with the regulations of Hospitals whether it be health or Title VI complaints. The plaintiff explained to the Ms. Meade that the level of health care was quite ineffective and caused severe injuries to the plaintiff, that the grievance system is sub-par and needs oversight, and that the plaintiff was denied access to information that should be open to the public. The defendant's agent Ms. Meade explained to me that certain things fall under work product. Then the plaintiff stated verbatim, "the standard operational procedure manual and the names of employees and bar numbers was not classified as top secret information especially when there is interaction with members of the public." The plaintiff continues, "Whether it is Colorado Open Records Act or the Freedom of Information Act, it requires that information involving interactions is supposed to be published on the company website." The verbatim account continues, "The hospital survives because of patients so it has to show a manual to show how it is supposed to interact with patients, I am not asking for something unreasonable I am asking for information on how this entity interacted with me, I am a member of the public and I interacted with Lutheran Medical Center. Are you stating that I am not a member of the public or that the information is a matter of national security and protected by the CIA?" Ms. Meade found that humorous and stated, "You are right Mr. Ward, what is your email? Can you send me all the information involving this issue?"

The plaintiff emailed the grievance, an open records request and the appeal. See email correspondence between plaintiff and defendant(s) acting in their official capacity as agents of the State that took place from 17th of July 2017 through 4<sup>th</sup> of August 2017. It is instructive to note that defendant CHFEMS or CDPHE agent explains while acting in their official capacity as an agent of the State that they investigate hospitals that do not meet the standard of care. The plaintiff emailed on the 17th of July 2017, "I apologize for the delay. However, I am sending you the initial grievance compliant, The Open Records request, the responses from Lutheran Medical Center, and the Appeal. If you can not help me get the information from the hospital that I am requesting can you please refer me to the appropriate administrative official or agency that will." The plaintiff points your kind attention to one thing mention in this email that, "if you cannot help me get information from the hospital," this statement did not mention anything about not investigating anything involving the medical malpractice nor any possible Civil Rights Title VI complaints that is within the CHFEMS or CDPHE discretion. The 18th of July 2017 the agent of CDPHE acting in their official capacity replies with this email, "Thank you for providing the additional information. Upon review, you will be provided with CDPHE's determination regarding your concerns. If it is determined this Department does not have jurisdiction over your concerns, you will be provided with the appropriate referrals." On the 18th July 2018 the plaintiff makes a call wanting to know how the investigation was going on the facility dealing with the standard of care. The plaintiff receives an email, "I received a message on 7/19 that you had a question about physicians. Please let me know what questions you have and I will be happy to assist you in obtaining the information requested." The plaintiff than response on the 26th of July 2017, "I'm afraid that your responds does not correlate to the subject matter of my compliant, however, I would like to know the names, license numbers and insurance carrier of Clinical Manager of the ED.(name unknown), and the Clinical Nurse Manager (name unknown). Then i would just like to know the license numbers to Amanda Kao, MD., Kevin Flynn, MD., Bridget Lauro, MD. and Scott Miner, Medical Director of the ED. I addressed several worries to you about my grievance as well as the lackadaisical response to my grievance, I would like to know what is being done about my records request that I had sent to the hospital." My response indicates two things the separation between grievances, which are the plaintiff's issues with subpar standard of care provided by Lutheran Medical Center, which invokes the jurisdiction CHFEMS or CDPHE responsibility. Then secondly, open records, which may not be. The defendant acting in their individual capacity continues with email response on the 27th of July 2017, "The Colorado Department of Public Health and Environment does not have jurisdiction over licensed professionals. You may contact the Department of Regulatory Agencies at 303-894-7855 or [www.dora.state.co.us](http://www.dora.state.co.us) for further assistance." The grievance clearly states medical issues that CDPHE should but did not investigate. On the 29th of July the plaintiff responds, "I think we are getting off track. I was under the impression that what your organization did was regulate each individual health care facility. When we talked on the phone. You told m to send the correspondence to you that Lutheran Medical Center and I have had. The reason why I contacted you in the first place was because Lutheran Medical Center denied me access

to their standard operation procedure manual, Lutherans insurance carrier and corporate attorneys, etc. And by both federal and state law I can request this information because Lutheran is a private agency that is funded by the government. I know and I have made the complaints on the doctors and nurses. what I need is the agency that will make them uphold the law. I am not requesting work product which Lutheran has denied me, I am asking for what is suppose to be posted by each private and public agency that receives money from the federal government (the Joint Commission, CMS, etc) that comes in contact with members of the public. I am a member of the public. So I did not make a doctors compliant with you ma'am and if your agency does not deal with that which facility regulates each individual hospital?" The plaintiff does acknowledge that he states that his only reason for contacting the defendant was for an open records request this was a statement out of frustration due to the manipulation by the defendant. However when the plaintiff initially contacted the CHFEMS it was due to the subpar standard of care of Lutheran Medical Center rendered to the plaintiff. The defendant's responds on the 4th of August 2017, "Thank you for patience as I reviewed your concerns regarding Lutheran Medical Center. The Colorado Department of Public Health and Environment (CDPHE) regulates the health care provided by medical facilities. You stated the facility failed to comply with the Open Records Act. The facility's compliance with the Open Records Act is not under the jurisdiction of CDPHE; therefore, this Department is unable to investigate the matter further." The plaintiff alleges that he invoked the jurisdiction of the CDPHE to investigate defendant Lutheran Medical Center and the defendant refused to do so.

- 2) Plaintiff Ward specifically alleges defendant Mr. Grant Wicklund acting in his individual or official capacity to wit, President and CEO of Exempla Lutheran Medical Center breached his medical duty by the authorization of staff privileges to incompetent physicians and unidentified traveler nurses who possessed a history of documented patient abuse. Defendant Grant failed to implement a patient grievance, resolution process that comports to the rudimentary demands of due process i.e. that identifies all parties involved issues related to plaintiff's medical malpractice episode. It cannot be said that the defendant lacked requisite knowledge of the other defendant's wrong doings (both employees and agent's private actors and borrowed employees). See certified mail receipt November 17, 2017 pre-suit notice of intent to file Civil Rights Medical Malpractice Action. At the time, Mr. Wicklund was acting in his individual capacity as the CEO of LMC, engaged in the conspiracy to withheld any written statements made or submitted by the alleged tort-feasors. Especially the unidentified traveler nurses including identification statements which would have identified the unidentified traveler nurses by names and all written statements from all responsible parties to this claim. The grievance system is not fair or impartial and it conflicts with the due process clause equal protection of the law that insures all grievance procedures shall be fair and impartial, all parties shall receive adequate notice and opportunity to be heard, a statement from the fact finder to reach the resolution of the grievance. Here the grievance hearing rose to the level of the ex-parte hearing and one party grievance resolution, which systematically excluded the



grievant during the grievance hearing. The private defendants crossed the threshold violation of the Privacy Act. Whereas the three party grievance committee engaged unconstitutional unauthorized disclosure of plaintiff's medical history and records to unauthorized third party. When the defendant Wicklund was given pre-suit notice instead implementing corrective measures he ignored the professional and medical responsibility created by statute and retained unethical representation (Chad Gilliam) who is the subject of abuse of authority and disclosure of information protected by the Privacy Act and establishes a right to relieve.

- 3) The Department of Jefferson County Commissioner(s) from the 10<sup>th</sup> of October 2016 to the present acted in joint participation with full approval of Lutheran Medical Center's unofficial custom(s) that had the effect of an adapted policy established knowledge and acquiescence of the well-settled custom(s) dealing with minorities and drug related patients. The Plaintiff knows that he is not the only patient that has been a victim of Lutheran Medical Center's "patient dumping" and racial invidious animus. Therefore, the Department of Jefferson County Commissioner(s) had time to issue orders, pass ordinances and laws that would force Lutheran Medical Center to handle minorities/ drug patients with better care. The Department of Jefferson County Board of County Commissioner(s) acted in their official capacity as decision makers providing significant aid from the State to assist operational efficiency to Lutheran Medical Center. As an agent of the State of Colorado the Department of Jefferson County Office of County Commissioner(s) were agents that were engaged in conduct otherwise chargeable to the State; at the time of the deprivation of the plaintiffs rights the private actor(s) or borrowed employee(s) were acting under the rule of conduct regulating Lutheran Medical Center. By the failure of physician(s) nurse(s) and other staff to perform a manifest duty created by the State and or federal law; EMTALA. Therefore, even by violating the EMTALA, there was/is no enforceable action by the State to encourage any private or public hospital to follow governing policies so Lutheran Medical Center has no fear of violating any laws because there is no direct oversight on how they handle or treat minority patients. This established joint and collective liability that is fairly attributed to the Department of Jefferson County Commissioner(s), Lutheran Medical Center and private or borrowed employees.

### **Statement of Liability**

- 1) Under title 42 U.S.C. sec. 1983 it provides a cause of action who under any statute . of any State, Territory... subjects, or causes to be subjected, any citizen .. to the deprivation of any rights, privileges or immunities secured by the Constitution and laws of the United States.

### **Claim Three Individual Liability**

- 1) Defendant Colorado Department of Public Health and Environment (CDPHE) acted in their official capacity as an agent of the State refused to protect the plaintiff's or members of the public's right(s) by investigating his medical complaint that was within their jurisdiction to do so. The defendant acted in joint participation by failing to investigate the subpar health services rendered to the plaintiff and then helping Lutheran Medical Center develop minority interaction classes that would help Lutheran Medical Center render quality services to minority patients. CDPHE is responsible and violated the plaintiff's right to equal protection under the law required by the Fourteenth Amendment. The plaintiff gave defendant CDPHE notice about the unofficial customs that had the effect of a well-adapted policy at Lutheran Medical Center and the defendant failed to conduct an investigation. An investigation would have exposed the racial and invidious animus atmosphere that is shared and inherited at Lutheran Medical Center due to a lack of government oversight and is the mere acquiescence in liability. The false statements implemented in plaintiff Ward's medical record is just one example of many of the violations that invoked the CDPHE into action. That was/is never taken to protect the patient or class that the plaintiff is part of, adequate and meaningful health care and the rights and privilege guaranteed by the constitution for proper due process and invokes the need to changes that this organization needs so that the needs, rights and privileges is being met of the public's wellbeing.
- 2) Defendant Grant Wicklund acted in his official capacity as Exemplar Lutheran Medical Center president and CEO and deprived the plaintiff right and privilege secured by the Fourteenth Amendment to adequate health care. Grant Wicklund through his choice of hiring or granting staff privileges to both the physicians that gave inferior care to the plaintiff, the nurses that contributed misleading information about the medical episode, and inferior treatment and the customs of the ex-parte grievance program that is operated at Lutheran Medical Center.
- 3) The Department of Jefferson County Commissioner(s) acting in its official capacity as an agent of the State by providing Lutheran Medical Center funding with poor oversight of the funding. The Department of Jefferson County of Commissioner(s) acted in joint participation with full approval of Lutheran Medical Center's unofficial custom(s) that had the effect of an adapted policy established knowledge and acquiescence of the well-settled custom(s) dealing with minorities and drug related patients. The defendant failed its duty to establish policies and procedures for the administration of county government to oversee hospitals and the grievance system and the implementation of quality hospital staff which cause direct injury to the plaintiff and deprived the plaintiff of adequate health care which resulted in numerous injuries and a near death experience. Lutheran Medical Center is a hospital that receives money and does not have to held accountable. Simple oversight by Department of Jefferson County Commissioner(s) of the policy directives of Lutheran Medical Center emergency room stabilization policy objectives, relating to minority

interactions and drug related emergency admissions would have prevented the plaintiff/patient medical malpractice episode and gave the defendant his equal right and privileges established by the Fourteenth Amendment. The defendant(s) gross negligent has caused direct injury to the plaintiff and countless others that do not know there rights and will cause injury to many more if they are not held accountable and forced to change their policies dealing with minorities.

### **REQUEST FOR RELIEF**

Wherefore, the plaintiff respectfully requests the court in its infinite wisdom and discretion issue sua sponte order granting wavier of prefilling fees, issue orders to the U.S. Magistrate to conduct a fact finding recommendation. Grant the total amount recoverable for all malpractice claims to the plaintiff and any and all relief as deemed appropriate by the court to the plaintiff.

**E. REQUEST FOR RELIEF**

*State the relief you are requesting or what you want the court to do. If additional space is needed to identify the relief you are requesting, use extra paper to request relief. Please indicate that additional paper is attached and label the additional pages regarding relief as "E. REQUEST FOR RELIEF."*

The Plaintiff respectfully request the court in its infinite Wisdom and discretion issue sua sponte order granting waiver of prefilling fees, Grant the ~~total~~ ~~cost~~ ~~the~~ ~~the~~ maximum amount recoverable for all malpractice claims, 1983 and emotional duress to the plaintiff deemed appropriate by the court to the plaintiff.

**F. PLAINTIFF'S SIGNATURE**

I declare under penalty of perjury that I am the plaintiff in this action, that I have read this complaint, and that the information in this complaint is true and correct. See 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Under Federal Rule of Civil Procedure 11, by signing below, I also certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

Anthony Ward  
(Plaintiff's signature)

04/22/2018  
(Date)

### CERTIFICATE OF SERVICE

I Anthony Wood, certify and attest that I Anthony Wood hand delivered a true and correct copy of a 1983, 1985 to Office of the United States District Court for the District of Colorado Clerk this 22 day of April 2018.

Date: 04/22/2018

Anthony Wood  
(Plaintiff's Original Signature)

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**IN THE UNITED STATES DISTRICT COURT**  
**FOR THE DISTRICT OF COLORADO**

Civil Action Number 18-CV-00232

April 22, 2018

Petitioner Anthony Ward

Dear United States District Court for the District of Colorado Clerk,

This is a letter for clarification. I, Anthony Ward did an amended complaint. In section D Claim Three of the complaint there are grammatical errors because I did verbatim accounts from emails. This was not done purposely however, I did not want to correct these errors because if it was not corrected at the time, I did not want to commit perjury so I kept everything identical to the actual conversation. Thank you for your kind attention.

Certificate of Service

I Anthony Ward hereby certify a true and correct copy of the aforementioned has been hand delivered to Office of the United States District Court for the District of Colorado Clerk this 22 day of April 2018.

Date: 04/22/2018

Anthony Ward  
(Plaintiff's Original Signature)

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